



ISSN 1180-4327

**Legislative Assembly
of Ontario**

First Session, 39th Parliament

**Assemblée législative
de l'Ontario**

Première session, 39^e législature

**Official Report
of Debates
(Hansard)**

Wednesday 28 October 2009

**Journal
des débats
(Hansard)**

Mercredi 28 octobre 2009

**Standing Committee on
Public Accounts**

Special Report,
Auditor General

**Comité permanent des
comptes publics**

Rapport spécial
Vérificateur général

Chair: Norman W. Sterling
Clerk: Katch Koch

Président : Norman W. Sterling
Greffier : Katch Koch

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Room 500, West Wing, Legislative Building
111 Wellesley Street West, Queen's Park
Toronto ON M7A 1A2
Telephone 416-325-7400; fax 416-325-7430
Published by the Legislative Assembly of Ontario



Service du Journal des débats et d'interprétation
Salle 500, aile ouest, Édifice du Parlement
111, rue Wellesley ouest, Queen's Park
Toronto ON M7A 1A2
Téléphone, 416-325-7400; télécopieur, 416-325-7430
Publié par l'Assemblée législative de l'Ontario

LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

STANDING COMMITTEE ON PUBLIC ACCOUNTS

COMITÉ PERMANENT DES COMPTES PUBLICS

Wednesday 28 October 2009

Mercredi 28 octobre 2009

The committee met at 0900 in committee room 1.

SUBCOMMITTEE REPORT

The Chair (Mr. Norman W. Sterling): I will call this meeting to order. I suggest that the first matter we deal with should be the draft report of the subcommittee, which met on Thursday, October 22, dealing with this morning's hearings and that we deal with the second draft submission this afternoon at 12:30. If you would be kind enough, Ms. Gélinas, to deal with your motion at that time as well.

M^{me} France Gélinas: No problem.

Mrs. Liz Sandals: We haven't seen a copy of that. Could we get a copy of that?

Interjection.

The Chair (Mr. Norman W. Sterling): The draft report is in front of you. I will read it for the record.

Your subcommittee on committee business met on Thursday, October 22, 2009, to consider the method of proceeding on the review of the 2009 Special Report of the Auditor General on Ontario's Electronic Health Records Initiative, and recommends the following:

(1) That the committee meet for the purpose of holding public hearings in the morning on Wednesday, October 28, 2009, in Toronto;

(2) That the following persons be invited to appear before the committee:

—Ron Sapsford, Deputy Minister of Health and Long-Term Care;

—Rita Burak, interim chair of the board of directors of eHealth Ontario;

(3) That the clerk of the committee, in consultation with the Chair, be authorized prior to the adoption of the report of the subcommittee to commence making any preliminary arrangements to facilitate the committee's proceedings.

Any discussion?

Interjection.

Mrs. Liz Sandals: Katch would like me to move it, Chair, as opposed to you. I will presume that if I were to read it, it would sound the same as if you read it.

I move the first subcommittee report—

The Chair (Mr. Norman W. Sterling): Be adopted?

Mr. Ted Arnott: We support the adoption of the subcommittee report.

The Chair (Mr. Norman W. Sterling): All those in favour? Opposed? Carried.

SPECIAL REPORT, AUDITOR GENERAL

The Chair (Mr. Norman W. Sterling): We have in front of us today Mr. Sapsford, Ms. Burak and some other officials within the ministry and eHealth. Mr. Sapsford has asked to make some comments with regard to some information which he has provided to us. Mr. Sapsford.

Mr. Ron Sapsford: Thank you, Chair. We return today tabling, this morning, with the clerk, the answers to questions that were posed to the ministry last week. I think that information is available now to the members of the committee.

I'd like to make one clarifying statement. Last week, I was asked questions about consultants in the Ministry of Health and my answer was they had all moved to eHealth Ontario. The vast majority did, of course, because they were associated with individual projects. However, my staff informed me that I have two individual people who are still with the ministry working on knowledge transfer. I think in the auditor's report one of the criticisms was that we didn't do enough knowledge transfer in the relationship between ministry and consulting staff. So that work is proceeding. One of the people will leave, I think, at the end of this week and the second one will leave during the month of November. For perfect clarity on that, I just wanted to expand on my comments so the committee had a full understanding.

The Chair (Mr. Norman W. Sterling): Okay. Perhaps we could have those people at the table identify themselves, starting from the left.

Mr. John McKinley: I'm John McKinley. I'm an assistant deputy minister for the health system information management and investment division.

Mr. Dennis Ferenc: Dennis Ferenc, working with the ministry's eHealth liaison branch.

Mr. Robert Devitt: Robert Devitt, interim CEO, eHealth Ontario.

Mr. Doug Tessier: I'm Doug Tessier. I'm the acting senior vice-president of strategy, development and delivery at eHealth Ontario.

The Chair (Mr. Norman W. Sterling): We'll begin questions with Mr. Arnott.

Mr. Ted Arnott: Thank you very much, Mr. Chair. I'm pleased that we have this opportunity to continue the questions with respect to the Auditor General's report on the eHealth Ontario issue. I know that my colleague, the member for Oshawa, is delayed somewhat due to traffic, but he's on his way. I know that we've got to work together on the questions and I know Mr. Ouellette will have some questions to follow up when he arrives.

I want to get back to the issue of the problem that the auditor faced in terms of commencing the audit. As all of you know, on page 7 of the report there is a section concerning the delay in starting the audit. The Auditor General has documented the problems that his office encountered in terms of starting the audit, commencing it. I wanted to ask the deputy minister, again, why that happened and who in the ministry was responsible for preventing the Auditor General from doing his important work on behalf of the people and the Legislature of Ontario.

Mr. Ron Sapsford: As I said in my answer last week, first of all, the ministry enjoys a very strong, positive working relationship with the auditor. The normal process of engagement when an audit is commenced—I receive notice from the Auditor General as to the area of investigation. Then, that's followed with a meeting between the audit team and ministry staff in the area of the ministry where that audit would take place. There is usually a discussion about the scope of the audit and the areas of interest that the auditor wants to examine, mostly to begin the process of gathering information from the ministry so that the audit team has access to that information. And in this particular case, that started.

There was a discussion between the audit team and the ministry staff in that area over the scope of the audit. I think it's clear from the audit report that the auditor intended to look at the electronic health record portion of it—and the ministry looking at electronic health information, because a lot of the work that was going on with respect to electronic health information was not focused specifically on electronic health records. There were components of it.

This was described as a value-for-money audit, and the ministry felt that to give a fair representation of the work that had been going on, particularly in questions of value, the scope of the audit should be broader than was initially suggested. That discussion carried on for a protracted period of time. As the auditor suggested, it shouldn't have gone on that long, and I agree with that.

0910

There were issues of access. The audit team generally will move into the premises of the ministry, and there were space issues, which were resolved, but there remained this ongoing discussion about the scope of the audit. When the auditor phoned me about the problem of access, the problem was resolved. From my point of view, there was a legitimate discussion about the scope of the audit, and there was a difference of opinion.

I would say that, at least for the Ministry of Health, 99-point-something per cent of the time, this kind of

issue doesn't arise, but in this case it did. In the subsequent discussion with the auditor, we agreed that we need a different mechanism when these kinds of disagreements arise so that they can be raised to the level of the deputy and the auditor and resolved appropriately.

That's my explanation as to why there was a problem with access.

I would hasten to add—and others here today can speak to the issue—information was provided. The audit team generally makes requests for information. My understanding is that those requests were satisfied and information, all through this time, was flowing between the Ministry of Health and the audit team. But in the final analysis, they weren't in the premises of the ministry, and this is what led to the auditor's comments.

Mr. Ted Arnott: Yes, I understand that that is the answer that you gave, more or less, last week. But I still would have to ask you: Who was involved in the ministry? Who was engaged in this discussion on the scope of the audit with the Auditor General, which led to many months passing before the audit commenced? Which ministry staff would have been involved in the discussion with the Auditor General?

Mr. Ron Sapsford: It would have been the program management of the branch and the assistant deputy minister. During that period of time, I had two different ADMs. The program director who was involved in that is here present today.

Mr. Ted Arnott: So you know who was involved.

Mr. Ron Sapsford: Generally, yes.

Mr. Ted Arnott: Is that Mr. McKinley as assistant deputy minister?

Mr. Ron Sapsford: Mr. McKinley is here and Mr. Tessier is here, who was at that time the director in that part of the ministry.

Mr. Ted Arnott: So I guess we'd then move to Mr. McKinley, to ask the same question. Why is it that it took many, many months from the time that the ministry was informed that the Auditor General wanted to commence an audit to when the audit was finally initiated? Why did the Auditor General feel that it was necessary to devote a significant portion of his report to this issue? Why did the Auditor General feel that he was being obstructed in the commencement of his audit?

Mr. John McKinley: To begin with, I think it's probably better to ask the Auditor General that final question as to why he felt it was necessary to put it into the report. From my perspective, I had—

Mr. Ted Arnott: Well, I'll tell you why: Because he's said on a number of occasions that it was one of the worst examples in his tenure as Auditor General, in terms of being able to access the information, which is his responsibility to undertake.

Mr. John McKinley: I began as the ADM for this area in November 2008. I knew about the audit. I knew about the work that the team was doing in preparing information for the audit. I knew there were documents and information being shared with the auditor at that time.

I did not meet at all with the audit team until January 8. At that time we were still discussing the scope and trying to make sure, as the deputy suggested, that we expand the scope of the audit so that we could get what we felt was a better value-for-money audit. The space issue was not raised with me at that time, and once it was raised, obviously it came back to me from the deputy very quickly and we moved on it very quickly.

To be quite honest, the space that the eHealth program was using was quite jammed. We had people working off-site. We had people working in a variety of different places, not on-site, because we just didn't have enough space. The program had expanded quite quickly. When you consolidate the number of people who were working across the ministry and then try to put them on one site—it just wasn't possible. There were huge space considerations within the program at that time.

Mr. Ted Arnott: So how were the space issues subsequently resolved? Did you move people out?

Mr. John McKinley: I think Doug Tessier is probably better to speak to it, because he actually did this, but people were moved off the floor. We had an opportunity to move people to another building based on the award of the IBM contract so that there was space becoming available at that time.

Mr. Ted Arnott: Mr. McKinley, who was your predecessor as assistant deputy minister?

Mr. John McKinley: It was Gail Paech.

Mr. Ted Arnott: Gail Paech. And when you talked about the issue of the scope of the audit, you're suggesting that you were trying to improve the scope of it?

Mr. John McKinley: Yes.

Mr. Ted Arnott: How would that be?

Mr. John McKinley: We were trying to suggest that there are other activities that are going along that are going to support the electronic health information that clinicians will use to make decisions about treatment of Ontarians when they're sick beyond what an EHR—the strict term of the EHR. For example, telemedicine is a use of the network. It's a clinical tool that's very useful, and we thought that that should have been included in the scope—that type of thing.

Mr. Ted Arnott: In terms of expanding the scope, were you concerned that you knew what was going on in eHealth and you knew it was going to look so bad that if you didn't expand the scope, in fact the problems would appear to be worse?

Mr. John McKinley: That wasn't what we were looking for. We didn't foresee the problems that came up in the end. What we were looking for was just a broader approach to the whole thing so we could see the whole thing. The timing was such that when the audit was originally envisioned, eHealth Ontario was not established. So then, when we moved through this, it obviously became—one of the issues that we were dealing with is the transition from the ministry to eHealth Ontario while the audit was under way.

So there were many things going on at the time, and we just thought it would have been a better value, from my perspective.

Mr. Ted Arnott: Would you now be prepared to tell the committee that you believe it was a mistake to obstruct the auditor?

Mr. John McKinley: Obstruct him from entering the space, yes, I would agree that we made a mistake there. I don't feel as though we were obstructing him. We were giving him information, we were meeting with them, and a lot of information was shared. So I don't think it was purposeful obstruction the way you're sort of characterizing it; I believe it was a mistake in terms of trying to find space, and probably we should have moved on that much quicker.

Mr. Ted Arnott: And in terms of the discussions over the scope of the audit that delayed the process by months, do you feel that that was a mistake?

Mr. John McKinley: As we discussed at the last meeting, the auditor has full authority to decide on scope, and there are many audits that they decide, ultimately, like this one, what the end scope is. Discussions go on with auditors about that, and ultimately it is their decision as to how they go about it. I don't feel as though those discussions were actually delaying the audit, from my perspective.

0920

Mr. Ted Arnott: I think there was a delay of many, many months, and that leads to more questions, quite frankly, from members of the Legislature and the general public, I think. I hope that this sort of thing isn't going to happen again.

I guess I would move to Mr. Tessier to ask about the space issue and how it was resolved. How much space did the Auditor General's staff require and how was it resolved that there was space created?

Mr. Doug Tessier: The Auditor General's team had requested—we basically walked around the floor with them and we identified a large boardroom with a locking office and multiple Internet connections. I think, at the time, our expectation was about a four-person audit team who were coming in. I think we had three staff in that location and were planning to move them out shortly, but not on, obviously, a timely enough basis for the audit team. When we did meet with the auditors and discuss both scope and space, we did identify that the way to make this happen faster did involve a discussion with either the ADM or the deputy. That certainly happened, as is the auditor's right. Perhaps we should have escalated that ourselves instead of having the auditors do it. But when that was escalated, within 24 hours we actually moved those people. They co-located first with other staff. We then had people sharing workstations and sharing connections, but we did accommodate the auditors in that space within 24 hours.

Subsequently, the audit team was larger than expected and there was a request made by Rita Mok, who was the operational lead of the audit on-site, for additional workstations, and we actually moved some other people out of

some workstations and accommodated that expanded audit team very quickly.

Mr. Ted Arnott: Yet presumably staff within ministry offices are moved around as a routine matter. I certainly recall, in my time in government, that that was the case. How many weeks was it, from the time that you realized that you had to make space for the auditor—how many weeks passed until you actually did make the space?

Mr. Doug Tessier: I think, after the initial discussions with the auditor, the information requests certainly started coming in in September, and were met throughout the course of the fall in education and exchange sessions. I think, actually, the on-site portion I would describe is around early December, and it did take us until February for the item to be escalated and for space to be provided.

Mr. Ted Arnott: I have to go now back to Mr. McKinley, and my question is very specific. Between the summer of 2008 and February 2009, were there any documents from the eHealth program removed or destroyed?

Mr. John McKinley: Not to my knowledge.

Mr. Ted Arnott: Mr. Tessier, do you know?

Mr. Doug Tessier: Not to my knowledge. I would say absolutely not, but certainly not to my knowledge.

Mr. Ted Arnott: So are you prepared to state categorically there were not?

Mr. John McKinley: As I say, from my understanding, no. No documents were removed and destroyed.

Mr. Ted Arnott: I have to ask that question of all the ministry staff, I guess, one by one—the ministry staff who are here at the table. Were there any documents destroyed during that period of time?

Mr. Dennis Ferenc: Not to my knowledge, no.

Mr. Ron Sapsford: Certainly not. No.

Mr. Doug Tessier: I was at the ministry at that point in time and certainly not to my knowledge were any documents destroyed.

Mr. Ted Arnott: The Auditor General has made reference to the absence of a number of documents from ministry files, including monthly and quarterly reports from the SSHA, which of course is the Smart Systems for Health Agency. I would ask Mr. McKinley the question: Do you have anything to do with these documents not being available to the Auditor General to look at?

Mr. John McKinley: No. As a matter of fact, I believe we found all of the documents except for one.

Mr. Ted Arnott: You found all of the documents? Pardon?

Mr. John McKinley: Yes, except for one; all of the quarterly statements that they were looking for—

Mr. Ted Arnott: So which document was still missing?

Mr. John McKinley: There is one quarterly statement, I believe, that is missing.

Mr. Ted Arnott: What do you mean, a quarterly statement?

Mr. John McKinley: That's what the auditor was asking for: quarterly statements from Smart Systems for Health and eHealth Ontario.

Mr. Ted Arnott: So what do you suppose happened to that document, the missing one?

Mr. John McKinley: The document management system that is in place in the ministry—when the responsibility for a program changes hands between a number of divisions, sometimes—I believe what has happened here is that a particular document was lost. This program has moved between three different divisions. The historical information was difficult to find. That's one of the reasons why it has just taken us a fair amount of time to find it.

Mr. Ted Arnott: How often is it that documents like that disappear?

Mr. John McKinley: I'd say it's rare, but I can't quantify it. It just was one of those things, when it went through several transitions, that the document management system wasn't adequate to keep track of all of the pieces of it.

Mr. Ted Arnott: Did you conduct an investigation to try to find that document?

Mr. John McKinley: Yes, we have been searching for those documents and have recovered all but one. We are still continuing to work on looking for that last one.

Mr. Ted Arnott: Do you know why anyone at the ministry would want to prevent the Auditor General from having complete access to all the documents?

Mr. John McKinley: No. There's no reason to do that, from our perspective. The challenge is in trying to find out how they were filed, where they were filed, that type of thing, because, as I say, the documentation management system was inadequate.

The Chair (Mr. Norman W. Sterling): Mr. Arnott, you'll have another—oh, Ms. Gélinas is not here. You can continue for a few minutes, then, Mr. Arnott.

Mr. Ted Arnott: Thank you, Mr. Chair. I'll return now to the deputy minister with some questions, if I could.

At the press conference when the Auditor General announced his report, he spoke of a conversation that he had with you about the delay in initiating the audit. Can you tell us your recollection of that conversation?

Mr. Ron Sapsford: Certainly. It was a very short conversation and very crisp, with the Auditor General expressing his—I'm not sure which adjective to use—his displeasure with the lack of access to ministry premises for his team to get on with the audit. I think we had a brief discussion, simply about the question of the scope, and his view was, "Nevertheless, we have to get on with it." His time frames were being challenged by that, so we agreed he would have immediate access. The next day, I think, that happened.

Mr. Ted Arnott: So what did you do as a result of that conversation?

Mr. Ron Sapsford: I phoned my assistant deputy minister and said, "The team's coming in now."

Mr. Ted Arnott: Okay.

The Chair (Mr. Norman W. Sterling): Are you finished with the deputy minister right now on that line of questioning? Okay. Ms. Gélinas?

M^{me} France Gélinas: As you know, we've done freedom of information. Piles of documents came forward. I tried to reconcile the statements of the Auditor General and put the thread through. Katch, did they get copies of the e-mails? I can give one to you anyway, because the questions will be for you.

I realize that in some of the information they gave to us, some of it is blacked out, and I have no intention of trying to get information that I'm not supposed to have, so don't feel that you have to share the secrets of the gods. But in some of the e-mails that are there, I would just like you to help me understand the conversations that were taking place.

The first one is—you have it in front of you. At the top you'll see a capital D. It's an e-mail between you and Shelley—I'm not too sure—Kapitan? I'm not too sure how to—okay. You've stated your title as of now. You had the same position back in—I think this is from April of this year. When did you become assistant deputy minister?

0930

Mr. John McKinley: I became assistant deputy minister of this program in, I guess, January 2008.

M^{me} France Gélinas: January 2008, okay. What is Shelley's position? Mrs. Kapitan, sorry.

Mr. John McKinley: She is a senior project lead with the community care information management project.

M^{me} France Gélinas: The community care information management project. The first question is, on April 13, Mrs. Shelley Kapitan e-mailed you regarding a medication management pilot program looking for a "physician champion, to help us to position this feedback in the right way." I'm just reading from the e-mail. Your response is cut off; not blacked out, it's just cut off. It's on the piece of paper that has a big D at the top. You mention someone; you can't remember their name, but that person is a reasonable person.

Did you ever find a physician to champion this, to position the feedback in the right way?

Mr. John McKinley: I'm not exactly sure if Shelley did actually get the—I know she talked to the OMA. I don't know whether she actually did get the person to champion it or not.

M^{me} France Gélinas: Do you know where this stands right now? The medication management pilot program?

Mr. John McKinley: Yes. The project was a success. I think they're going through the evaluation at this point, so I don't have the final report on that, but that's where it's at.

M^{me} France Gélinas: It was a success, and we're going to make a decision as to whether this particular pilot will be extended, or—

Mr. John McKinley: Yes. This is part of the long-term-care homes' RAI-MDS implementation. It is a common assessment tool for a long-term-care home resident, and the medication management portion of it is

just one of the potential areas where we see that we could get some clinical value out of doing those assessments.

M^{me} France Gélinas: Very good. You have in front of you—if you want to flip the page—another puzzling e-mail, and it's again between you and Mrs. Kapitan. The e-mails refer to someone named Chandyke; I'm not too sure how to pronounce the name. Do you know who this refers to and the position of this person?

Mr. John McKinley: Yes. Chandyke is a financial adviser in the Ministry of Health and Long-Term Care, and he is the sort of lead on long-term-care home funding in our financial management branch.

M^{me} France Gélinas: This e-mail refers to year-end money becoming available, and Shelley suggests asking for an additional \$2.5 million to \$3 million for phase three homes on the long-term-care home cap funding. Did that funding flow?

Mr. John McKinley: Yes, it did, into some particular homes. The program that we're trying to establish with long-term-care homes, the implementation of this common classification tool, is funded in two different ways. One of the ways is through annual appropriations from the ministry and the other way is through the long-term-care homes' underspending; if they have underspending in the program, then we push it towards the project so that we can finish it.

M^{me} France Gélinas: Did the money flow toward eHealth, or did it flow toward homes to put this common classification tool—

Mr. John McKinley: Yes. It never went through eHealth. That has nothing to do with eHealth. It's a program that is being run by the long-term-care homes.

M^{me} France Gélinas: Okay, so this is one of those e-mails that came to us but had nothing to do with eHealth?

Mr. John McKinley: That's right.

M^{me} France Gélinas: Okay. We get a few of those. They're hard to sort out. You know what? Freedom of information doesn't come with instruction manuals, it just comes with piles of paper. Okay, thank you.

Flip to the next one. All right, we're now talking about SIPC. I take it to mean that this is the strategy and investment priority committee?

Mr. John McKinley: Yes.

M^{me} France Gélinas: So, here again, Mrs. Kapitan says, "Hi John, with SIPC's okay, all we need now is the confirmation from the MO. Did they respond to you yet?"

The next e-mail page comes completely blacked out to us, but it's titled: "Verbal Approval." I take it the "MO" means minister's office?

Mr. John McKinley: That's correct.

M^{me} France Gélinas: And what was she referring to in that e-mail?

Mr. John McKinley: What she's talking about is that SIPC is a subcommittee of our ministry management committee. It deals with financial and programmatic expenditures in trying to manage the ministry's spend to keep it within budget. As part of that, this project would've had to go to SIPC to get approval for that, or

representatives from this project would have gone. Once they got that approval, then we have to schedule it with the minister's office for potential announcements. So that's why she was asking if they had responded yet. That's the process that goes on. The government has the opportunity to make announcements about funding, and this is how we manage it through the process.

M^{me} France G elinas: Just so that I understand, when is it that you go to the minister's office and when is that you don't? I'm trying to understand what the guidelines are.

Mr. John McKinley: When there's new funding being announced, we always go to the minister to make sure that they have the opportunity to—whether they want to announce this funding or whether they just want to have it flow out. That's their decision.

M^{me} France G elinas: Okay. Flip the page—two pages, because we have a blank one in there. The last e-mail I wanted to talk to you about came from Rohin Bhargava.

Mr. John McKinley: Very good.

M^{me} France G elinas: What position does he hold?

Mr. John McKinley: He's another senior project manager in the CCIM project.

M^{me} France G elinas: Senior project manager?

Mr. John McKinley: Yes.

M^{me} France G elinas: That e-mail talks about the Ministry of Finance's Ontario Buys program waiving the third party review based on the success of the projects to date. He refers to the Ministry of Finance not being responsible if there are cost overruns. You see the four little things. He asked if he should write an e-mail on behalf of CCIM, and he mentioned that once he did, the funds would be released. What funding was he referring to?

Mr. John McKinley: It was for releasing funding for a series of projects in small and complex continuing care hospitals for the implementation of the management information system, which is the financial and statistical reporting system that the ministry requires reporting from all hospitals.

M^{me} France G elinas: Do you remember what the value was?

Mr. John McKinley: The total value that they have committed, I believe, is in the \$10-million range.

M^{me} France G elinas: About \$10 million? Did the money flow?

Mr. John McKinley: It is flowing now over time. They have to meet a schedule of milestones for the hospitals to be able to get the money from Ontario Buys.

M^{me} France G elinas: Okay. It appears from the e-mail that they were ready to waive third party reviews. It says it right there, "... agreed to waive the third party review based on the success of the projects to date." What does a third party review usually mean and why wasn't it needed this time?

Mr. John McKinley: That's a process that Ontario Buys goes through. It's part of their decision-making process as to which projects they fund and which ones

they don't. I'm probably not the best person to respond to that since I don't run Ontario Buys. From my understanding, on large projects they normally go through a third party review, but since we've had so much success with implementing MIS in community care access centres and in community mental health organizations, they believe that the success that we've had on this pass would just follow through in the hospital sector.

0940

M^{me} France G elinas: So this had to do with the management information system. Again, it has very little to do with eHealth?

Mr. John McKinley: Nothing.

M^{me} France G elinas: Okay. It came to us under eHealth. That probably explains why I couldn't connect the dots with those documents: because they had very little to do with it.

In the auditor's report, he certainly mentioned that there was a lack of oversight, and that led to some of the money—not getting value for money for the people of Ontario. What was your role in overseeing? Which parts of the transactions of eHealth were your responsibility to oversee?

Mr. John McKinley: To begin with, as I said, this was added to my portfolio in November 2008. At that time, the government had created the new agency, eHealth Ontario. My major focus at that time was the transition: to have the discussion with the agency about what their new memorandum of understanding would be, what their new transfer payment accountability agreement would be, what government policies and procedures they would have to go through for their approvals and so on. It was also about how we transition the number of consultants and the resources that we had inside the ministry to the agency. That was my major focus.

Within that, the team that we had in the eHealth program was managing the day-to-day relationship with the former Smart Systems for Health and eHealth Ontario. As part of that, they were on a monthly budget, so they had to apply to us for their monthly cash flow. We monitored them relatively closely on their cash flow. We had discussions with the transition team, which was a joint team between the ministry and eHealth Ontario, as to how best to do this transition. There was oversight there as well.

There wasn't oversight in the detail. The detailed methodology that they were using to procure resources was not part of the discussions. We did talk about what level of exemption they would be granted from the Management Board and treasury board guidelines. That was a point of discussion for quite some time. That includes the Management Board guidelines for the gating of IT projects.

M^{me} France G elinas: The what? Gating?

Mr. John McKinley: Gating. There's a process inside the government of Ontario that establishes financial limits as to when an information technology project has to come forward for approval through a number of different committees and ultimately to Management

Board and treasury board. That was part of the discussion that we were having. There were two discussions. We wanted to make sure that eHealth Ontario would meet the spirit of the Management Board directives and also both the I&IT procurement and gating processes.

M^{me} France Gélinas: Would you have been aware of some untendered contracts?

Mr. John McKinley: No. We were not aware of the procurement process that they were using, and they were not sharing it with us. We were, as I say, dealing with the individuals who came to the table and were assigned to do this work.

M^{me} France Gélinas: I realize that hindsight is 100%, but should you have been aware?

Mr. John McKinley: Ideally, yes, I guess I should have been aware. It's kind of hard to say, because, as you say, hindsight is 20/20.

M^{me} France Gélinas: Yes. When did you become aware that there were consultants being paid \$300 an hour for changing messages, that there was this amount of untendered contracts, that there was such a number of—I'm not supposed to be judgmental—sole-sourced contracts? When did you become aware of this?

Mr. John McKinley: When it hit the media.

M^{me} France Gélinas: Not until it hit the media?

Mr. John McKinley: That's right.

M^{me} France Gélinas: If we try to put this behind us and move forward, do you figure you should have known before?

Mr. John McKinley: In an ideal world, yes. It should have been much more transparent. It was one of the challenges that we were dealing with. We were trying to be open and transparent from the ministry side in our transfer of what resources and contracts we had. We disclosed it all to them, and we were trying to encourage that same level of transparency, but it wasn't reciprocated.

M^{me} France Gélinas: If things could have been caught up earlier, what would have needed to be in place so that after one or two sole-sourced contracts, one or two untendered contracts—what would have needed to be there in order for you to become aware so that you could act? I'm guessing you would have acted.

Mr. John McKinley: I think the clarity around the rules now is much greater; the government has changed the rules. There is much less discretion by managers in choosing to do that. So, given that, I think that is part of the solution.

Obviously, there is the development of a trusting relationship that has to go on between the ministry and the agency—trust that we're getting full disclosure and the information that we need. That's the environment that we're trying to create as we go forward.

M^{me} France Gélinas: So clarity around the roles—could you expand on this? What roles got clarified, in which way, and how is this going to help?

Mr. John McKinley: The Premier has announced that there will be no more sole-sourcing; there will be clear—the under \$25,000 has to be tendered, and all the rest of

the enhancements to the Management Board rules, policies and guidelines make it much clearer, and it reduces the discretion of managers to take on contracts that way.

M^{me} France Gélinas: And do you figure that those policies by themselves, once they are written—civil servants are human beings, like everybody else, as far as I'm concerned. Managing change is something—people are usually a little bit reluctant to change. In this particular case, putting it down on paper means that we can trust it will be done?

Mr. John McKinley: I think there's an openness now that we can talk to eHealth Ontario. The CEO has talked about how he has to sign off going to his board. That's the kind of assurance that we can use. The accountability relationship that we will finalize over the next little while will have some of those elements in it to make sure that they do follow the Management Board guidelines, and there's an expectation for that. Whether we include his report as one of the reports that comes to the ministry, that's a possibility too. We're still in discussions over those things.

M^{me} France Gélinas: So from what you're telling me, you feel pretty confident that there won't be any sole—I can't pronounce the other word.

Mr. John McKinley: Sole-sourcing.

M^{me} France Gélinas:—sourcing and there won't be any more untendered contracts from people you are responsible for?

Mr. John McKinley: That's my expectation, yes.

M^{me} France Gélinas: Okay. What do we do with the parts where we had—and that was an example in the auditor's report—the consultant paid \$300 an hour to change voice mail and greetings and organize functions?
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Mr. John McKinley: That is a contract that eHealth Ontario let. They're running that contract; they'll have to deal with it.

The Chair (Mr. Norman W. Sterling): Ms. Gélinas, is this a good point to break from your round?

M^{me} France Gélinas: Give me one more minute to finish that idea.

The Chair (Mr. Norman W. Sterling): Okay.

M^{me} France Gélinas: So are you saying that if eHealth was to decide to do that again, you wouldn't know, you wouldn't care or it could still happen?

Mr. John McKinley: No, that's not what I was saying. You referred to a particular contract, and I said that eHealth should deal with the results of that particular contract.

One of the accountability measures and one of the performance measures we are watching very closely is how they're using consultants and how many they have. So we have to measure the number of consultants and make sure that, as they continue to do their work in that forum, they get more and more staff so there won't be those types of contracts let; they would only be on the special nature of the electronic health information area.

M^{me} France G elinas: But is there something in there that assures us that we're getting value for money? I think the deputy made it clear, and I think you made it clear too, that there's now a set goal of how many consultants—there should be that many more—and there's a plan to get us there. How do we ensure that within the consultants that remain, we have value for money? Three hundred dollars an hour to change greetings on voice mail is not value for money. The auditor says it, I agree and I think you'll agree too.

Mr. John McKinley: What we would expect is that along with the project charters and the documents that would go along with a contract, the RFPs would have clear deliverables, clear milestones and clear expectations. Those are public documents—they're released in the public domain—so I think there's an opportunity for transparency in what is expected out of each of those contracts.

M^{me} France G elinas: And none of that was there before?

Mr. John McKinley: Not on those sole-source contracts, no. They did not release RFPs; they obviously let the contracts go on their own and just hired them.

The Chair (Mr. Norman W. Sterling): Mr. Zimmer.

Mr. David Zimmer: I have a couple of short questions to Mr. Devitt. There's a lot of detail floating around in the last couple of days. My question is: In your opinion, what is the single biggest obstacle to moving forward with an effective eHealth?

Mr. Robert Devitt: I think the single biggest obstacle is the complexity of the task.

Mr. David Zimmer: The follow-up question, then: How are you going to tackle that and break down that complexity so you can solve the various elements of the complexity?

Mr. Robert Devitt: We do it by taking on the challenge in bite-size chunks. There's the old saying that you can't eat an elephant all at once; you do it one bite at a time. Creating an EHR, I would argue, is akin to that. The only way for a province this complex and a population this large that will get an outstanding electronic health record is by doing it one step at a time, always looking at how you're going to link step one with step two with step three with step four. In part, the challenge of this, as you're down that journey, is that you never get to lever the full advantage of the EHR until you've gone through all those steps. So on the course of that journey there will always be challenges of trying to explain why it isn't there yet as you're building it step by step. But that's how we'll do it, and do it with excellent project management and excellent governance and administration.

Mr. David Zimmer: That tells me that what has to happen at eHealth is a real cultural shift in the management paradigm from the—I say this with respect—chair of the board to the CEO to senior management and middle management right down to the last person in the management and delivery chain. How are you going to

go about implementing and creating that sort of cultural shift that folks in the organization buy in to?

Mr. Robert Devitt: I think we do it in a number of ways, because that's another elephant-size challenge in terms of organizational change, particularly in this organization where we have a merger. We need to understand that eHealth Ontario is, in essence, the outcome of a merger between Smart Systems for Health Agency and the ministry eHealth program. So overlaying that cultural shift is also effectively executing a merger, and we know that mergers are challenging organizational changes to begin with.

I think the way we effect the kind of transformation and change your question speaks to is that we start at governance. We have a board of very skilled, experienced governors who are developing a whole range of board practices, board processes and expectations. The expectations define how we are to behave, the kind of rigour and robustness that management needs to put into its decision-making. That then cascades through the management structure. So one of the things I'm doing is looking at putting in place a more coherent, stable organizational structure so people know who reports to whom and there's clarity about who is accountable for what.

We do it through our human resource function. In fact, as we speak, I have partnered with the Ontario Hospital Association, who are actually helping us do a complete review of human resources, training, staff development, recruitment, retention, succession planning: all those fundamental practices that are needed to make a business not only thrive but succeed and be very, very successful.

As we roll out bite-by-bite changes—if I use, as an example, delegation of authority—it's not just about drafting a new policy and having the CEO or the chair send out an e-mail saying, "Here's the new policy, please follow it"; we actually roll out policy now with detailed education. So, for delegation of authority: Who is allowed to sign for what, what you do when the authority is away, how you ensure that you understand what you can and can't sign for. There is an intensive education session for all people covered by that policy, and I personally, as CEO, went to the session and sat through it, (a) to show managers that this is serious—the CEO is investing the few hours and learning about the policy just like everybody else; and (b) so that I can clearly understand the policy, not just Rob Devitt's interpretation of it, but really go through that detailed analysis of what it means so that we're all on the same page. I think that would be the other thing we do.

Mr. David Zimmer: Two short follow-up questions—and I appreciate the new vigour you are bringing to the organization. To the extent that that vigour or vision was missing or confused in the past, why was it missing or confused in the past and what lessons do you draw from that confusion, if you agree there was confusion?

Mr. Robert Devitt: It's hard for me to give you an informed comment or calibration on what was or wasn't there in the past. I can only speak to the hand I was dealt

when I started at the beginning of August. It's hard for me to give you an opinion one way or the other on people who preceded me. In fact, as I think the committee is aware, I came in and picked up the baton from Ron Sapsford, who had been there for two months and had started a number of these changes.

I guess what I can say, in terms of the vigour or what I think I'm bringing, is that over the course of my career I've been involved in a number of major system changes. I've been part of a merger in Peterborough, of the Peterborough Civic and Peterborough St. Joseph's, which was a merger of a denominational hospital and a municipal hospital, obviously something pretty complicated. At Scarborough, as a supervisor, I went in a decade after a merger to help turn around an organization that even after a decade hadn't fully merged.

What I can comment on is what I think we bring to the table; that is, a very basic, systematic approach to change, step by step, piece by piece, not trying to change it all at once but one change at a time. On any given day, it doesn't feel like you've made a lot of progress, but over a week or three weeks or three months, you look in the rear-view mirror and say, "Oh my goodness, look how far we've come."

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Mr. David Zimmer: Thank you, Chair.

The Chair (Mr. Norman W. Sterling): Ms. Sandals.

Mrs. Liz Sandals: Actually, my first question is for the Auditor General, going back to some of Mr. Arnott's questions around quarterly reports. You mentioned in your report that these quarterly reports had gone AWOL, and as I read your report, I sort of got that your concern was that perhaps the reporting was not being done because you couldn't find the reports.

Mr. Jim McCarter: One of the questions we asked the ministry was, "What sort of monitoring or oversight of SSHA were you doing?" One of the comments we had was, "We get periodic reports from SSHA kind of giving us a sort of state of the nation: what's going on, how much money we're spending, what are the risks, what are the problems we're dealing with?" So, as auditors, we'd obviously say, "Let's have a look at the reports. We'd like to see where they've identified issues." And we would ask the follow-up question: "Is there any memorandum, or what have you done from the ministry perspective to work with the SSHA to address those issues?"

Essentially, in asking for those reports, some of them were made available. If there had been one or two reports missing out of 25, it wouldn't have been in the report, but there was a substantial number that could not be provided to us at that time. Being somewhat skeptical auditors, we would say, "If you haven't got the reports, maybe it's evidence that the oversight wasn't as good as it should have been," and that's why we reflected that in the report.

As the ministry has said, since we left the field and completed the audit, they have found most of those reports, I gather.

Mrs. Liz Sandals: And those reports have been turned over to you, or could be turned over if you actually wanted them now, I presume?

Mr. Jim McCarter: Usually, once we're out of the field—as you know, we go back in a couple of years and do a follow-up on all our recommendations. Typically, that's the sort of thing we would follow up on at that time.

I have no doubt that if I asked the ministry for copies of those reports, they would be provided rather quickly.

Mrs. Liz Sandals: And the fact that there is still one gone AWOL would not be high on your list of concerns; it was the fact that you couldn't find them because they had been filed someplace else? The fact that they're there would, let's say, bring your skepticism down several notches? They exist, they're there—

Mr. Jim McCarter: It might bring it down one notch. I'd still say that the fact they couldn't find them fairly quickly might be indicative that when they came in, perhaps they weren't given the attention they deserved. Typically, if they were, you'd think there would be a file by month, or whatever: "We got this report from SSHA. They raised these issues. We discussed one of them with senior management." There could have been an action plan.

The fact that they were subsequently found—I guess I'd really need to see the rest of the documentation. It's one thing to have the report—often too, you get reports back from community service agencies and other organizations; they get received and go into a file. I'm not necessarily talking about health, but we see this in ministries that we audit and not necessarily review. The obvious follow-up question is, "What did you do when you got it?"

I certainly think it would bring it down a notch, but it wouldn't diminish our concern entirely.

Mrs. Liz Sandals: But it's something you can deal with when you go back in for the review?

Mr. Jim McCarter: Yes.

Mrs. Liz Sandals: Thank you. I think Mr. Leal has a question.

The Chair (Mr. Norman W. Sterling): Mr. Leal.

Mr. Jeff Leal: Thanks very much, Mr. Chair. I have a question for Mr. Devitt. Rob, it's good to see you this morning.

After the Sinclair commission came through in 1997-98—the merger of two hospitals in Peterborough, St. Joseph's and Civic—you played a critical role in cementing together two philosophical approaches to health care; I was on one of the boards at the time. Tell me about that outcome, merging two philosophies to get an outcome, which is so important to providing quality health care. I see that your experience through that is going to come in handy in your new position with eHealth.

Mr. Robert Devitt: Sure. Through the Health Services Restructuring Commission—

The Chair (Mr. Norman W. Sterling): Mr. Devitt, I don't know whether this goes to the issue.

Mr. Robert Devitt: I think the point is the complexity of a merger—

Mr. Jeff Leal: Exactly.

Mr. Robert Devitt: —and eHealth is a merger of an arm's-length government agency—Smart Systems for Health—and a series of departments in the ministry that were pulled together and then transferred out. So there was sort of a merger within a merger as well.

The lessons from a successful merger like the Peterborough hospitals was that it takes time. Again, you do it sort of one step at a time, and through this there's a whole series of business transaction pieces that have to get merged: how the organizations procure, how they hire, how they do compensation, how they do performance management. In fact, I would say that in some ways, as we now move forward at eHealth Ontario, that is the very process we're going through.

If I use human resources as an example, we have Smart Systems for Health HR practices and old ministry eHealth program practices, and we have to pull them together. It's not necessarily taking one or the other, but it's building something that's going to be robust and appropriate for a much larger organization. Through that transition, it is quite possible that mistakes get made or inconsistencies happen. If one decision-maker is playing off one playbook and the other off the other playbook, until we've actually gone through that process of consolidation, it's quite conceivable that different people end up taking different strategies because that piece hasn't been done.

It's important to stress how complex and sort of comprehensive that is. If you think of the policy manual of any organization—the HR and business policies—I'm sure they're all about this thick. Trying to pull two of those together and doing it in a coherent way that everybody understands, going forward, and there's adequate reporting, does take time. That is the kind of mundane but very important stuff the eHealth team is doing now.

Mr. Jeff Leal: Good. Thanks so much.

The Chair (Mr. Norman W. Sterling): Mr. Ramsay.

Mr. David Ramsay: Thank you, Mr. Chair. To Mr. McKinley, I guess: How many of those quarterly reports are there in total?

Mr. John McKinley: I'm not sure exactly how many there are. I think it's over 20, though. I'd have to verify the number.

Mr. David Ramsay: So they obviously go back quite a few years—

Mr. John McKinley: Yes.

Mr. David Ramsay: —at least four or five years' worth.

What is the time period for the one that is not found yet?

Mr. John McKinley: I don't have that information in front of me. I could get it and bring it back to the committee.

Mr. David Ramsay: Could you submit those reports to the committee?

Mr. John McKinley: Absolutely.

Mr. David Ramsay: That's great, thanks.

The Chair (Mr. Norman W. Sterling): Mr. Arnott.

Mr. Ted Arnott: Mr. Ouellette.

The Chair (Mr. Norman W. Sterling): Okay. Mr. Ouellette.

Mr. Jerry J. Ouellette: Thank you, Chair. Mr. Tessier, when did you receive your promotion to senior VP at eHealth?

Mr. Doug Tessier: I left the Ministry of Health in April 2008 and joined eHealth Ontario at that time in the position of vice-president of delivery partners. On the very first day I was there, Sarah Kramer approached me and indicated that Michael Guerriere was leaving the senior VP position for strategy and she would like me to fill that position on an acting basis, so April 20, 2008, and I've been filling it since. It has actually been expanded to include the delivery and deployment sides.

Mr. Jerry J. Ouellette: That was 2008, you're saying, not 2009?

Mr. Doug Tessier: I'm sorry, it was 2009.

Mr. Jerry J. Ouellette: That's okay. It would be a little difficult.

Some of the questions I have: The bulk of the contracts that took place basically from June 2008 to March 2009 accounted for about \$6.5 million and they appear to fall outside the guidelines that were established in the rules that were mentioned earlier. How is it that these contracts were approved when they didn't follow the guidelines?

Mr. Doug Tessier: I think the contracts that were approved in fact had to fit the guidelines in some way, shape or form in order to be approved. They were put forward for approval inside eHealth Ontario to the ADM, based on that level of signing authority. They did use government VORs and went forward under that premise. They were signed off—if they were small contracts, certainly managers in the area had signing authority under \$100,000, or to the ADM or the cluster CIO for signing above that, up to \$750,000.

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Mr. Jerry J. Ouellette: Yes, but these are Ministry of Health contracts, not eHealth contracts?

Mr. Doug Tessier: You're talking about—you said between June 2008—

Mr. Jerry J. Ouellette: Yes.

Mr. Doug Tessier: The contracts I would be aware of, at that time, would be at the Ministry of Health. It would be after April 2009 that I was at eHealth Ontario.

Mr. Jerry J. Ouellette: No, these are Ministry of Health ones that I'm referring to. For example, in the contract EH08-123R, the contract date specifically states that it started July 28, yet the billing for July, which would be three days, was \$95,949 for three days of work by an individual. How can that be?

Mr. Doug Tessier: I don't have that contract before me. I would be surprised that you could bill that much for one individual. Some of these contracts were for very large teams, so you could get large billings. I would still

be surprised for that period. I think one of the things that the auditor has identified is that there were cases where work actually started before the contract. I'm not sure if that's one of the cases, but that could lead to higher billing during the month of July. For that, if that did happen, it would have been identified and escalated for—

Mr. Jerry J. Ouellette: If you weren't sure, then who should be knowing this?

Mr. Doug Tessier: Things go up to the ADM of the program, who at that time was ADM Gail Paech. She would've had signing authority up to \$750,000 at that time. So that's where contracts of that size would have gone for approval.

Mr. Jerry J. Ouellette: But our understanding is that you should be the one who should be directly responsible in handling a lot of these contracts that were allocated out.

Mr. Doug Tessier: I was responsible for deployment, delivery and strategy and certainly would have had a role both in selecting vendors and awarding contracts and making recommendations to the ADM or the appropriate authority at that time for ones within my area of control.

Mr. Jerry J. Ouellette: This would not be one that, after the contract was awarded, you weren't aware of any of the actions that took place and where that would go to the ADM at that time?

Mr. Doug Tessier: No, in fact, I would be aware of the actions and I would be reviewing time sheets and validating that the work had actually been done and performed by the people who were there. So if it was for a contract in my area, I would have been the signing authority for time sheets and recommending payments under that contract to the ADM.

Mr. Jerry J. Ouellette: We know that the scrutiny for those contracts over \$300,000 was substantially more than those that were under \$300,000. The scrutiny for anything under \$25,000 was certainly far less, but there appears to be a significant number of contracts that fall into the \$297,000 or \$285,000 area in these timelines. It's concerning to a lot of us that they appear to be falling just under those scrutiny levels in order to make sure that they're not scrutinized at a higher level. Can you explain or do you have any background on—I'd be happy to give you EH08-109D, for example; that's one of them. There are a significant number of them that appear to—

Mr. Doug Tessier: The scrutiny on all the contracts I would describe as the same. The level of authority for approval varies. Certainly, over \$100,000 and up to \$300,000, that would be the assistant deputy minister who would have to approve that contract. Beyond that level, I would describe the scrutiny as the same; it's just a different person who actually has to approve that.

Mr. Jerry J. Ouellette: So you're saying that anything between \$100,000 and \$300,000 would be to the scrutiny of the deputy minister, then the deputy would—

Mr. Doug Tessier: The assistant deputy minister.

Mr. Jerry J. Ouellette: So the assistant deputy minister would be the one—

Mr. Doug Tessier: As a director within a program, I had authority up to \$100,000 in signing limits, unless specifically assigned, for very short periods of time, a higher amount, but that would have been the ADM's authority, though.

Mr. Jerry J. Ouellette: There seem to be a lot of contracts that were individualized as opposed to one single contract for the \$6.5 million. Can you explain as to why that was broken down as to individual contracts as opposed to one? From our perspective at least, the concern is that it appears that if you're under the \$300,000, it's certainly not the same level of scrutiny if it's over. And if it's a \$6.5-million contract, basically what these amount to would be a different amount of scrutiny as well.

Mr. Doug Tessier: I would agree with you on that, Mr. Ouellette. If the contract were a large, \$6.5-million amount, that would certainly be an RFP as opposed to a vendor of record RFS. Certainly, as a program manager, our instructions were to use the RFS, the vendor of record system, for our procurements—

Mr. Jerry J. Ouellette: And the reasoning for that would be?

Mr. Doug Tessier: I'm not sure of the reasoning for that. You'd have to take that to a higher level in the ministry. As the director, those were the instructions we got from our assistant deputy minister—

Mr. Jerry J. Ouellette: The ADM was the one who gave you the directions to use the process that you used?

Mr. Doug Tessier: Yes.

Mr. Jerry J. Ouellette: Okay. I think those are all my questions for now.

The Chair (Mr. Norman W. Sterling): Ms. Gélinas?

M^{me} France Gélinas: My question will also be to Mr. Tessier. The signing authority is very clear: You know the amount; you know who to move it up to. The scrutiny, though: Is this always directly linked with the person who has signing authority, or is there a level of scrutiny as you go up?

Mr. Doug Tessier: There is a level of scrutiny that starts inside the project with the project manager who's reviewing the time sheets for the resources that are put in place. That includes a project management function within the eHealth program, and there is a similar function at eHealth Ontario that monitors project budget and activity against milestones on at least a monthly basis so that you can actually ensure that you're moving the project forward and that the work is actually being done. That happens certainly at a project manager and director level, and carries up right through the program.

M^{me} France Gélinas: So the example that the auditor gives that a consultant was hired, paid \$300 an hour and her task was to change greetings on voice mail, do greetings and arrange—so everybody up the chain would have known the hours' bills for that consultant. Who would have known that we were paying that consultant \$300 an hour?

Mr. Doug Tessier: That relates to something before I was at eHealth Ontario.

The Chair (Mr. Norman W. Sterling): Mr. Sapsford.

Mr. Ron Sapsford: You have to understand: Mr. Tessier, for the previous set of questions, was responding for the ministry. Your question about billings for e-mails and so forth was in eHealth Ontario, not in the ministry. So I just wanted to be clear that the auditor's report is dealing with two separate agencies. His response on your last question is really directed at eHealth Ontario, not the Ministry of Health.

M^{me} France Gélinas: Okay. In your new role at eHealth Ontario, would you know: Who would know how much those people were being paid by the hour and what they were doing for that pay?

Mr. Doug Tessier: Their direct project supervisor would, and in my case, because I'm the senior staff member for many of the projects under me, I would know, starting from April 20 onwards, from a time sheet perspective, exactly what all the resources did. We have both a paper time sheet process and an automated process where all of our resources, both consultants and staff, are required to identify what they worked on during a specific period, the number of hours. So I would know that for every individual who worked for me, whether consultant or staff.

M^{me} France Gélinas: And the example that the auditors give, did you know about it?

Mr. Doug Tessier: I was not at eHealth Ontario at that time.

M^{me} France Gélinas: Okay, so you didn't. And in your role at the ministry you wouldn't have known?

Mr. Doug Tessier: The ministry would not have access to detailed time sheets for consultants at eHealth Ontario.

M^{me} France Gélinas: Okay. They would come afterward.

How much time do I have?

The Chair (Mr. Norman W. Sterling): You have three minutes left.

M^{me} France Gélinas: I'll use them wisely. John, you told us that you found out at basically the same time as your deputy, when you read it in the paper. Looking back on this, had there been any flags that now you look back and say, "That was a flag; we missed it"?

Mr. John McKinley: If I put this in context, we achieved a transition from a ministry-operated program to an agency in about four months. When we've done this in other areas, it has taken between 12 and 18 months. So one of the things that I would say in looking back is, maybe if we'd taken more time to actually manage the change, we might have had an opportunity to see types of things like that. That's what I would say is one of the learnings, from my perspective.

M^{me} France Gélinas: Where did the big rush come from? Why didn't you take 18 months?

Mr. John McKinley: It was felt as if the agenda of eHealth Ontario was so important that we had to move ahead on it, that there was the opportunity for delay, the

opportunity for slowing down the progress on all of the projects, and it needed to move on.

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M^{me} France Gélinas: Who gave you that feeling that things were so important that they needed to move that quickly?

Mr. John McKinley: It's a government direction. The government made the decision to move ahead with eHealth Ontario, create an agency. The entire government wanted to. Both my deputy and I agreed that there was a need to move it on.

M^{me} France Gélinas: Given that he mentioned you, Deputy, do you agree with what he just said, that it was the government driving the pace, that that's what motivated you and your team to move the transition in four months rather than the 18 that would have been more prudent?

Mr. Ron Sapsford: The notion of consolidating all the work around electronic health records at the agency was the goal. The agency was created in the late fall, and the board and CEO appointed. The discussion immediately turned to the transition period. I had detailed discussions about the transition with the CEO of eHealth. The speed at which the transfer was to take place was clearly one of the discussions, recognizing that receiving all of the projects from the ministry would create a management burden on the agency. We talked about that on a couple of occasions.

I would have to say that I was more hesitant than the CEO. I was concerned about the date of the transition. Would all projects move on the same date? Should we move one project at a time over a three- or a six-month period? We talked through those options, but clearly the agreement was that they would transfer at one point, the CEO of eHealth Ontario feeling it was more important to begin the process of consolidation and the direct management of those projects.

M^{me} France Gélinas: Did you share that feeling of wanting to slow things down with the minister?

Mr. Ron Sapsford: With the minister? No. That was a management decision in terms of implementation. The minister wouldn't normally be involved in that discussion.

M^{me} France Gélinas: So you just knew that it was a government priority that needed to happen, the faster the better, and from then on you implemented it at the speed that the CEO and you agreed on?

Mr. Ron Sapsford: Correct. The government had taken its policy decision the year prior. The agency was in place. The board was there in a functioning management, so it was more of an implementation consideration than a policy direction from the government.

The Chair (Mr. Norman W. Sterling): Ms. Sandals.

Mrs. Liz Sandals: One of the things that the public is clearly concerned about is this whole issue of, "Is there an eHealth system out there that has any functionality? As a taxpayer, what do I get for all this money that has been spent?" Clearly what's also going on right now is with H1N1; people are concerned about that. The ques-

tion might come up: Is there anything about this eHealth system that helps support the ministry in managing H1N1 or the health system?

I'm not sure which one of you wants to grab a piece of this, seeing as the ministry is doing H1N1 and you guys are doing eHealth. I'll let you take a bite.

Mr. Ron Sapsford: Perhaps I'll start, and my colleagues might want to finish because we're both involved. There is currently in operation a system called IPHIS; it's an integrated public health information system. It has been in operation for a number of years. It performs the function of disease surveillance. In other words, as physicians identify particular diseases in the community, it's put into this system so that the public health physicians and epidemiologists can track the course of the disease and identify problems perhaps earlier than has been the case in the past.

What that system does not have, however, is the tracking of individual immunization records. It does not have the capacity to track vaccine distribution across the province, and inventory control, which is important particularly with this particular H1N1 vaccine. There has been a project developed; it has been working now for almost a couple of years, I believe, to develop a public health integration system that does all those things. It's called Panorama. This is a national program. Almost all provinces are developing the same software so that there's consistency across the whole country, because for disease surveillance, it's important; diseases don't respect boundaries. So there's some important consideration to do this at the national level. It is being adapted for Ontario, and as I said, the plan was for implementation during 2010. So it's quite well advanced.

However, now we have H1N1. Our public health officials have felt it is important that we begin to track, in a more rudimentary fashion, the immunization records. As people get vaccinated for H1N1, we will be keeping records of people who are vaccinated—which isn't traditional in seasonal flu—as well as keeping track of the vaccine and who got which lot, so that quality control and safety can be monitored after the fact.

At the moment, eHealth Ontario and their staff have turned their attention to assisting in implementing this, I'll call it, short form of the broader Panorama system so that it can be put into operation for the current flu season. At the conclusion of that, we'll return to the implementation of the broader system. That's an important component of what we would call electronic health information.

Mrs. Liz Sandals: What I hear you saying is that there's a conversation going on where the ministry is identifying urgent priorities and that eHealth is responding. Mr. Devitt may want to comment on this.

Mr. Robert Devitt: Absolutely. With H1N1, the ministry engaged us in a conversation about whether it was possible to tone down the volume on part of a project and turn it up on another so we could be more responsive, and we're working together to do that.

Mrs. Liz Sandals: Thank you very much. I think I said S1N1 instead of H1N1; I'm combining swine and H1N1.

The Chair (Mr. Norman W. Sterling): Okay. Thank you very much to the witnesses for today.

Members of the committee, we're going to be meeting at 12:30. There's going to be a sandwich next door. If there are enough around before 12:30—I don't know what the schedules of people are—we might, in camera, start on some of the reports, but we'll have to weigh that. Are you going to be here before 12:30?

M^{me} France Gélinas: Yes.

The Chair (Mr. Norman W. Sterling): So, we'll work—

Mrs. Liz Sandals: I think for the formal part, we need to know that it's going to start at 12:30.

The Chair (Mr. Norman W. Sterling): It's 12:30. At 12:30 is when we have Hansard, and that's when we'll be dealing with the subcommittee report.

Mr. Ted Arnott: Mr. Chair, for the benefit of you as Chair and the staff, I just want to indicate that our caucus has more questions for the ministry staff and we would hope to continue this discussion at the next meeting next week.

The Chair (Mr. Norman W. Sterling): And with you, Ms. Gélinas?

M^{me} France Gélinas: There was a series of other e-mails that I would have liked to clarify. I didn't have time. I concentrated on Mr. McKinley because he was here today.

The Chair (Mr. Norman W. Sterling): Okay. We'll have a subcommittee report and subcommittee meeting and discuss our schedule either this afternoon or this week sometime.

Thank you very much.

The committee recessed from 1025 to 1232.

SUBCOMMITTEE REPORT

The Chair (Mr. Norman W. Sterling): Our first order of business is to consider the second part of the draft report of the subcommittee. Ms. Gélinas?

M^{me} France Gélinas: Can I move that we adopt the report?

The Chair (Mr. Norman W. Sterling): Yes, you can move that. Perhaps you might read the report into Hansard.

M^{me} France Gélinas: It will be my pleasure.

Your subcommittee on committee business met on Thursday, October 22, 2009, to consider the method of proceeding on the review of the 2009 Special Report of the Auditor General on Ontario's Electronic Health Records Initiative, and recommends the following:

(1) That the committee meet for the purpose of holding public hearings in the afternoon on Wednesday, October 28, 2009, in Toronto;

(2) That the following persons be invited to appear before the committee:

—Dr. Alan Hudson, former chair of eHealth Ontario;

—Sarah Kramer, former president and chief executive officer of eHealth Ontario.

End of report.

The Chair (Mr. Norman W. Sterling): You've moved adoption of the report. Do you want to speak to your motion?

M^{me} France Gélinas: Yes, absolutely.

I found during the presentation and question-and-answer session from the previous presenters that they often pointed out that the answers to our questions lay with those people who were there, either because they didn't want to infer a response for them—they basically are not able to answer our questions because they were not there. At some point, as well, they sort of laid blame on them and said that things went wrong. That was especially true of the first time the deputy came. He made it clear that some of the findings of the auditor were there because of the actions of Dr. Hudson and Mrs. Kramer.

I think it would bring an opportunity for us to understand better if we had an opportunity to question them.

The Chair (Mr. Norman W. Sterling): Okay. Further debate?

Mr. Ted Arnott: I would just concur and agree that if we're going to be able to fill in all the blanks in this ongoing narrative, we really do need the input of Dr. Hudson and Ms. Kramer. They are key actors in this ongoing saga, and without their input, I'm afraid we're not going to get all the answers we need.

1240

The Chair (Mr. Norman W. Sterling): Ms. Sandals.

Mrs. Liz Sandals: Just in partial response to what Ms. Gélinas had to say, I think it isn't just simply a case that the deputy specifically cited some issues that involved Ms. Kramer's actions. I think the Auditor General's report actually cites some of the actions of Ms. Kramer as being problematic.

However, having said that, the problem with calling these particular people is in the titles as opposed to the individuals. It's the former chair of eHealth Ontario and the former president and chief executive officer of eHealth. We are a committee of the Ontario Legislature. The Ontario Legislature follows British parliamentary tradition, and in British parliamentary tradition, it is the incumbent who answers.

We've had quite good access to the incumbents: to the deputies and the deputies' staff; to Ms. Burak, the current chair, and Mr.—oh, dear, I've got a short memory. You know him, Jeff: the acting CEO.

Mr. Jeff Leal: Mr. Devitt.

Mrs. Liz Sandals: Mr. Devitt. I was going to say something slightly different. Mr. Devitt, the acting CEO. We've had their full co-operation in coming and answering questions, and that's what is consistent with British parliamentary tradition. As a committee of the Legislature, I believe we should be consistent with British parliamentary convention.

The Chair (Mr. Norman W. Sterling): Mr. Ouellette.

Mr. Jerry J. Ouellette: Well, in that light, British parliamentary tradition also deals with precedent, and we set a precedent by allowing Mr. Tessier to come in and present. He is no longer a government member—but also a former government member. We heard his presentation, and some of the things that he mentioned were very specifically dealing with individuals—who are no longer in other positions—whom I would like to question as well, because those individuals were giving him direction, according to him. He's no longer in that position of working for the ministry.

To me, if we're going to allow it to happen for Mr. Tessier, it should be allowed to take place for other members as well. It's the only way to find out, actually, the exact details of how this unfolded.

The Chair (Mr. Norman W. Sterling): Further debate?

Mrs. Liz Sandals: Just to note that Mr. Tessier was identified on the agenda as a vice-president or acting vice-president of eHealth. He appeared here identified as a vice-president of eHealth Ontario.

The Chair (Mr. Norman W. Sterling): Yes, Ms. Gélinas?

M^{me} France Gélinas: I'm all for respecting parliamentary procedures as much as the next one, but I don't think those procedures go as far as stating, in any standing orders or anything, that we cannot have other people in front of the Standing Committee on Public Accounts. That argument, to me, does not hold.

The Chair (Mr. Norman W. Sterling): Mr. Arnott?

Mr. Ted Arnott: I'm for British parliamentary tradition too. In fact, I think that those traditions are important. I understand the government's argument is that because of British parliamentary tradition—I don't know what precedents the members would be prepared to cite in that respect, but British parliamentary tradition involves the functioning of the Parliament itself, not so much the functioning of the public service. Certainly a big part of British parliamentary tradition, as I understand it, is the responsibility of the government to the Legislature. This public accounts committee is a very important part of the accountability mechanisms that are built into this place.

I would submit again that if the two principal players, Dr. Hudson and Ms. Kramer—neither of whom are politicians—are not at least invited to participate in this process, our report is going to have a lot of holes in it and it's not going to contribute much to our responsibility as a committee, which is to hold the government to account, of course, in terms of its spending; to respond to the Auditor General's reports generally; and to give the public some reassurance that, in fact, we're doing our jobs.

The Chair (Mr. Norman W. Sterling): Further debate? Ms. Sandals.

Mrs. Liz Sandals: I would just note that in the time I've been on this committee, there have been numerous occasions when we have called the current deputy, even though the subject of the report might have been largely

under the purview of a previous deputy. There have also been occasions where we have called the current chairs and current CEOs of agencies, even though the actions that the report is reporting on took place under previous chairs or previous CEOs. So in fact, this committee has been quite consistent in calling current deputies and their current staff, and current chairs and CEOs of agencies and their current staff.

The Chair (Mr. Norman W. Sterling): Any further debate? Mr. Ouellette.

Mr. Jerry J. Ouellette: Mr. Tessier's evidence that he presented was from while he was working within the ministry, everything that was taking place there. I don't understand why it would be such a problem.

This parliamentary tradition—we're dealing with something far beyond the normal activities of government here. There's something very concerning to a lot of people. Quite frankly, from a political perspective, to try to stop them from coming in would certainly indicate to us that now we're finding something they're trying to hide here to some extent. I don't think we want to do this or that we want to look at any of that aspect; we want to give the opportunity. I think that the current president and CEO should be included as well, but if we need to talk to other individuals, we should not be limited to the individuals who we can request to present before this committee.

The Chair (Mr. Norman W. Sterling): Any further debate? I'll call the question.

Interjection.

The Chair (Mr. Norman W. Sterling): Yes?

M^{me} France Gélinas: Sorry. Ms. Sandals opened up referring to British parliamentary procedure then went to say maybe it's not the British parliamentary procedure; it has more to do with what we've done here in the past. To me, this doesn't hold much ground. At the end of the day, we have a report from the Auditor General. It is our mandate to make sure that we understand and that we can make clear recommendations so that we have value for money. A lot of money was spent. Those people have knowledge that would be of great importance to us to hear them so that we can do our job properly.

The Chair (Mr. Norman W. Sterling): Mr. Arnott.

Mr. Ted Arnott: I'm reluctant to have to say this, but it appears that the government members do have their marching orders on this, and it appears that they're going to want to vote this draft report of the subcommittee down. I say that with some regret because I believe that, especially when we start talking about British parliamentary tradition as an excuse, this doesn't seem to me to be anything to do with British parliamentary tradition. It's reminding me more and more of Watergate, quite frankly.

The Chair (Mr. Norman W. Sterling): Okay. All those in favour—

Mr. Ted Arnott: Recorded vote.

Ayes

Arnott, Gélinas, Ouellette.

Nays

Leal, McNeely, Ramsay, Sandals, Zimmer.

The Chair (Mr. Norman W. Sterling): I declare the motion lost.

COMMITTEE BUSINESS

The Chair (Mr. Norman W. Sterling): Next, we have another motion submitted by Ms. Gélinas. Ms. Gélinas, I ask you to put forward your motion.

M^{me} France Gélinas: You have a motion in front of you, and unfortunately, there's a new Tide, a new improved motion that I want to move forward. It's similar, but the language is better. I'm sorry it took me so long to be able to spit out what I was thinking, but I think I'm getting closer. Here it goes; it starts the same.

I move that the Standing Committee on Public Accounts immediately request that the Auditor General examine compensation—I took out "methods"—for senior executives—and this is where the change comes—in the entire public service ministries to determine whether such compensation is appropriately disclosed in accordance with the government's salary disclosure guidelines.

That's it.

1250

The Chair (Mr. Norman W. Sterling): Okay. Discussion? Do you want—

M^{me} France Gélinas: Sure. At the end of the day, we have salary disclosure. We have all read the papers and know of two cases—one a deputy minister and one with the Premier's office—where salaries were not disclosed in the way that we would have expected them to be. As I found out, it's not solely at the Ministry of Health that those happen. It also happens in other ministries. So all I'm asking the auditors to do is to look—I'm not interested in salary levels. I'm not interested in this. All I'm interested in is if we are following the disclosure guidelines, the spirit of what the guidelines were meant to do. That's all.

The Chair (Mr. Norman W. Sterling): Ms. Sandals.

Mrs. Liz Sandals: If the issue is disclosure, the Premier has already directed that salaries would be disclosed in the ministry where the person is being employed, not at the transfer agency from which they have been seconded, and I'll quote the Premier because this is from Hansard in question period:

"That's why we have undertaken—I believe my honourable colleague knows this—to ensure that if you look up the salary of a senior bureaucrat working inside the Ministry of Health, that will be reflected under the Ministry of Health column and not buried away in some other hospital. Like my colleague, I disagree with that practice and that's why we're going to change it."

I don't believe he was simply talking about the Ministry of Health. He was talking about a general policy

change. The issue of whether people are being appropriately disclosed has already been addressed. There's been a policy change to make sure that it shows up in the ministry where it's supposed to be.

When this motion first started off, it appeared to be about the issue of secondment, and with respect to secondment, if secondment is being used to park somebody's salary so that you're not seeing it, then clearly the salary should show up where the person is currently employed. But the issue of secondment is actually quite a normal practice. I can think of three ministries where secondments are extensively used. The Auditor General may know of others, but I certainly know of three where secondments are extensively used. They're used in the Ministry of Health, they're used at the Ministry of Education and I would presume that they are used at the Ministry of Municipal Affairs.

The reason for that—and I know a lot about education secondments because I've seen them happen both at the receiving end and the sending end—is because often the ministry wants to use the expertise of someone on the ground for a limited period of time. It is hugely to the disadvantage of the person who is being seconded to discontinue their permanent employment relationship with a hospital, a municipality or a school board because all three of those have quite attractive pension plans, so people want to stay formally as an employee of those groups.

I'm sure secondments happen in other contexts, but there is nothing wrong with somebody being seconded from a school board at any level. I've seen people get seconded from the classroom teacher level right up to director level. I'm sure the same is true in health. You see people at various levels in hospitals, including hospital CEOs, being seconded because there's a legitimate need to borrow their expertise for a limited period of time and then they go back to where they came from. So the presumption that secondments are necessarily bad I disagree with.

The problem that is mentioned in the final motion—and I don't have the wording here in front of me—which seems to be to look at the reporting of whether they're being appropriately disclosed, has already been addressed. So I don't see any point in sending the auditor off to look at an issue that's already been resolved.

The Chair (Mr. Norman W. Sterling): Further debate?

M^{me} France Gélinas: Well, that was an interesting monologue on the use of secondment, but that's not what the motion talks about. The motion talks about looking at the entire public service to see how the disclosure of salaries is done. Sure, there will be people on secondment. There will be a number of other working arrangements that are not maliciously—they're there so that the government can do its job. I'm not saying any of this is wrong. All I'm saying is that we have guidelines regarding salary disclosure, and I want the auditor to check whether they're being followed.

The Chair (Mr. Norman W. Sterling): Mr. Ouellette.

Mr. Jerry J. Ouellette: Jim, is this something that you see would be—this would be a lot of ministries, because there are so many different levels at each of the ministries. How would you envision anything like this taking place, factually and beneficially?

Mr. Jim McCarter: We actually came across this when we did a government-wide audit of temporary help services about four years ago. We noticed that it was occurring at the Ministry of Health predominantly, but we also noticed it was occurring at a number of other ministries. We did notice, since this is where individuals were making more than \$100,000 and weren't being disclosed in accordance with the public sector salary disclosure. So we did come across it in the past, we have reported on it in the past, and we did express our concern about it in the past.

With respect to the impact on our office of doing this particular motion, as I said last week, if the public accounts committee passes a motion, we will get the work done. This would be a much more bite-sized piece of work, a much smaller piece of work, than the motion that was passed last week, which is going to involve a fair bit of work because it talked about all of the hospitals, and that's getting into a fair bit of work—154 hospitals. This would be a smaller piece of work.

The Chair (Mr. Norman W. Sterling): Just a small correction, Mr. Auditor General: The motion was not passed last week; it was a proposed motion. I think the original motion had—

Interjection.

The Chair (Mr. Norman W. Sterling): I am confused, then. You are right.

Mr. Jim McCarter: That doesn't happen very often.

The Chair (Mr. Norman W. Sterling): I'm sorry. I was confusing—I thought you were referring to Ms. Gélinas's previous motion, which had not been dealt with yet.

Mr. Jim McCarter: No. With this one, we're familiar with the issue. It would be a fairly small piece of work for us and—

Mr. Jerry J. Ouellette: But that's only pertaining to the Ministry of Health. What about other ministries? Because it does happen—

Mr. Jim McCarter: The way the motion reads, it looks at—basically, it says, "Auditor, look into whether this is happening at ministries across the Ontario public service." So we would have to go to all the ministries and we'd say to them, "We'd like to know who you've got on secondment and who's not being paid through your ministry." Then we would also have to do some due diligence work. We'd do some spot checks at the ministries to make sure that if they gave us a list, they're actually telling the whole truth and nothing but the truth. So it would involve us going out and doing work at the ministries.

We have a pretty good idea of where we think it's occurring more often than not—the Ministries of Education; Colleges and Universities; Health.

Mr. Jerry J. Ouellette: Do you believe the intent is to circumvent the \$100,000 figure, or do you believe it's more an intent for expertise?

Mr. Jim McCarter: I have to be honest, I'd be kind of guessing—

Mr. Jerry J. Ouellette: Let me reword that, then. In the past, when you have found this, did you find that there was intent for specific reasons? If so, what was that intent? Was it to circumvent a financial aspect or was it because of expertise?

Mr. Jim McCarter: My sense is, I guess, as Ms. Sandals said about the Premier saying that if someone—Ron Sapsford was one of the examples mentioned. He's being paid through, I think, the Hamilton health centre and he's disclosed under that, but he's not disclosed under the Ministry of Health.

The point we were making was that the purpose of this information—it's called the public disclosure act. The public can go to this and find out who these people are. Our point was, we think that for the Deputy Minister of Health, somebody should be able to go under the Ministry of Health records and see the Deputy Minister of Health's salary disclosure. That was our point. We weren't sure that met the intent of the legislation.

The Chair (Mr. Norman W. Sterling): Further debate? Ms. Sandals.

Mrs. Liz Sandals: Just to say that we agree with what the Auditor General just said, that when you're looking at senior executives at a ministry, you should be able to go to the ministry website and find out what they're making regardless of whether they're seconded or not.

But as I say, the policy decision to do it that way has already been made. I'm not sure that it is a productive

use of the auditor's time to tell us that there should be a policy—the policy just changed; going and looking at it right now isn't going to be helpful. When he comes to revisit that particular report down the line somewhere, he can look and check that the policy has truly changed, but we're not going to find out anything new by sending him out to do this right now. The policy has changed, the issue has been addressed. I'm not sure that we're going to usefully find anything out.

The Chair (Mr. Norman W. Sterling): Ms. Gélinas.

M^{me} France Gélinas: I have not seen the policy, but from what the Premier said in the House, it deals specifically with secondment. I could rhyme off 10 other kinds of employment opportunities with the ministry that don't have to do with secondment and don't have to do with becoming an employee of the government either, and they would all be included in what we're trying to do here. Yes, we have identified that people being seconded from hospitals were not being disclosed in the way that the spirit of the guidelines wanted them to be. The auditor could show us if there are other such instances.

The Chair (Mr. Norman W. Sterling): I think we've heard from everybody with regard to this matter. Therefore I call a question: All those in favour of Ms. Gélinas's motion? All those opposed? The motion does not pass; it fails.

That takes care of all of the matters that we would be dealing with with regard to the committee in open session, needing Hansard. We will remain and work on some of the reports in camera. I would ask members of the public if they would leave at this point so that we can get on with our report writing.

The committee continued in closed session at 1300.

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